Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control n PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 'OH77544 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY (Column 1) SMALL ENTIT (Column 2) **FOR** NUMBER FILED NUMBER EXTRA **RATE** FEE RATE **BASIC FEE** (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS minus 3 = (37 CFR 1.16(b)) OR X \$ MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 1) (Column 3) **SMALL ENTITY** SMALL ENTITY **CLAIMS** HIGHEST AMENDMENT A REMAINING NUMBER **PRESENT** RATE ADDI-RATE ADI **AFTER PREVIOUSLY EXTRA** TIONAL **401T AMENDMENT PAID FOR** FEE FE Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) x **s200** 200 X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω PRESENT REMAINING NUMBER RATE ADDI-RATE ADE **EXTRA** AMENDMENT **AFTER PREVIOUSLY** TIONAL TION AMENDMENT PAID FOR FEE FEI Total Minus Ξ (37 CFR 1.16(c)) X \$ OR Independent Minus (37 CFR 1 16(b)) X \$ OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR

		(Column 1)		(Column 2)	(Column 3)	
ENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total (37 CFR 1,16(c))	•	Minus	••	=	
	Independent (37 CFR 1 16(b))	•	Minus	•••	a .	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					

RATE	ADDI- TIONAL FEE
× \$ =	
x \$=	
+ \$=	
TOTAL ADD'L FEE	

	RATE	ADD TION FEE
	x \$=	
	X \$=	
	+ s=	
•	TOTAL ADD'L FEE	

OR

OR

OR

OR

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.